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(Denositor's mme (Signature) Date

APPLICATION NO FIT ING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO 10/519 219 05/13/2005 Iasti Venkateswarln 03108/0202223-US0 7317 TITLE OF INVENTION: NOVEL TETRACYCLIC ARYLSULFONYL INDOLES HAVING SEROTONIN RECEPTOR AFFINITY USEFUL AS

SMALL ENTITY ISSUE FEE DUE APPLN. TYPE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1510 \$300 sn \$1810 12/04/2009 CLASS-SUBCLASS EXAMINER ARTINIT STOCKTON, LAURA LYNNE 1626 514-373000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Darby & Darby (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) Rec. 5/13/2005 R/F: 016594/0609 PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment.

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

THERAPEUTIC AGENTS, PROCESS FOR THEIR PREPARATION AND PHARMACEUTICAL COMPOSITIONS CONTAINING THEM

Suven Life Sciences Limited

Hvderabad, India

Please check the appropriate assignee category or categories (will not be printed on the patent) : 🚨 Individual 🚨 Corporation or other private group entity 📮 Government

4a. The following fee(s) are submitted: 4b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above)

Il Issue Fee A check is enclosed. 2 Payment by credit card. Form PTO-2038 is attached. Dublication Fee (No small entity discount permitted)

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5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status, See 37 CFR 1.27. □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature /Andrew O. Larsen/ Date December 3, 2009 Registration No. 59,315 Typed or printed name Andrew O. Larsen

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